



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application Of: Rock A. Gagnebin

Application Serial No: 10/822,928

Filed: April 13, 2004

For: Vacuum-Operated Trash Receptacle
(Amendment A)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA. 22313-1450

I hereby certify that this correspondence is being deposited
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EV 559599574 US

John M. Harrison
John M. Harrison

Jan 22, 2008
Date

Case Docket No. 9173

In re application of Rock A. Gagnebin

Serial No. 10/822,928

Filed April 13, 2004

For Vacuum-Operated Trash Receptacle

THE COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

(Col.1)		(Col.2)		(Col.3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	*	MINUS	**	=	x	= \$		x 18	= \$
INDEP.	*	MINUS	***	=	x	= \$		x 84	= \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+	= \$		+280	= \$
					TOTAL		OR	TOTAL	
					ADDIT. FEE	\$			\$

*If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

Please charge my Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is attached.

A check in the amount of \$ _____ is attached.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____. A duplicate copy of this sheet is attached.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17.